

This policy form is for Nursing Home and Residential Care Facility Only. This is an Individual type policy and is classified as Tax Qualified.

**Maximum Policy Benefit Amounts**

☒ 1 Yr.      ☒ 2 Yrs.      ☒ 3 Yrs.      ☒ 4 Yrs.  
☒ 5 Yrs.      ☒ 6 Yrs.      ☐ 7 Yrs.      ☒ Lifetime

☒ Important Company Notes:

2920 days is equivalent to 8 years.

**Elimination Periods**

☒ 0 days      ☒ 60 days      **TYPE**  
☐ 20 days      ☒ 90 days      ☐ Calendar Day  
☒ 30 days      ☐ 100 days      ☒ Service Day

**Inflation Protection**

☒ 5% Compound      ☐ Guaranteed Purchase Option  
☒ 5% Simple      ☒ Important Company Notes

Also available are 3% and 4% compound inflation options. The Maximum Daily Benefit Amount and the Maximum Benefit Amount per claim episode are increased each policy anniversary by the selected inflation option without regard to claims paid. Premiums remain level.

**Nursing Home Daily Benefit Amounts**

\$40 minimum to \$300 maximum per [day, week or month] offered in increments of \$10.

☒ per day      ☐ per week      ☐ per month

☐ Not Available

☐ Important Company Notes:

**Residential Care Facility Daily Benefit Amounts**

Represents the percentage of the Nursing Home Daily Benefit Amount.

☒ 100%      ☐ 90%      ☐ 80%      ☐ 75%  
☐ 70%      ☐ Important Company Notes

**Waiver of Premium**

Premiums waived after 90 days of receiving covered services, regardless if the elimination period has been satisfied. Premium is waived for the entire policy, including any attached riders and spouse's premium if covered under the same policy.

Annual premium amount for Nursing Home and Residential Care Facility Only Policy with a \$100 daily benefit amount.

30 Day Elimination Period. 3 year maximum policy benefit			90 Day Elimination Period. 3 year maximum policy benefit			90 Day Elimination Period. Lifetime benefit		
Issue Age	No Inflation Protection	With 5% Inflation Protection	No Inflation Protection	With 5% Inflation Protection		No Inflation Protection	With 5% Inflation Protection	
50	\$284	\$777	\$258	\$708		\$386	\$1,147	
55	\$374	\$999	\$341	\$910		\$514	\$1,456	
60	\$550	\$1,332	\$501	\$1,213		\$755	\$1,930	
65	\$868	\$1,845	\$790	\$1,681		\$1,189	\$2,664	
70	\$1,469	\$2,698	\$1,338	\$2,458		\$2,024	\$3,894	
75	\$2,517	\$4,047	\$2,294	\$3,687		\$3,422	\$5,725	
80	\$4,128	\$6,161	\$3,761	\$5,614		\$0	\$0	

Refer to Section 3 for information on premium increases, if any, since 1990 for this company.

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**Maximum Policy Benefit Amounts**

- ☐ 1 Yr.    ☐ 2 Yrs.    ☒ 3 Yrs.    ☒ 4 Yrs.  
☒ 5 Yrs.    ☐ 6 Yrs.    ☐ 7 Yrs.    ☒ Lifetime  
☐ Important Company Notes:

**Elimination Periods**

- ☒ 0 days    ☐ 60 days    **TYPE**  
☐ 20 days    ☒ 90 days    ☒ Calendar Day  
☒ 30 days    ☐ 100 days    ☐ Service Day

**Inflation Protection**

- ☒ 5% Compound    ☐ Guaranteed Purchase Option  
☐ 5% Simple    ☐ Important Company Notes  
*On each policy anniversary, the daily benefit amount, as well as the remaining benefit amount payable is increased by 3% or 5% compounded annually.*

**Nursing Home Daily Benefit Amounts**

\$50 minimum to \$300 maximum per [day, week or month] offered in increments of \$10.

- ☒ per day    ☐ per week    ☐ per month  
☐ Not Available  
☐ Important Company Notes:

**Residential Care Facility Daily Benefit Amounts**

- Represents the percentage of the Nursing Home Daily Benefit Amount.
- ☒ 100%    ☐ 90%    ☐ 80%    ☐ 75%  
☐ 70%    ☐ Important Company Notes

**Waiver of Premium**

Premiums due for the policy and any attached riders are waived after satisfaction of a 90 day waiting period for facility confinement. Any unearned premium is refunded on a pro-rata basis, including premiums paid during the 90-day waiting period. Premiums are waived until facility confinement ends.

Annual premium amount for Nursing Home and Residential Care Facility Only Policy with a \$100 daily benefit amount.

Day Elimination Period. 3 year maximum policy benefit			Day Elimination Period. 3 year maximum policy benefit			Day Elimination Period. Lifetime benefit	
Issue Age	No Inflation Protection	With 5% Inflation Protection	No Inflation Protection	With 5% Inflation Protection		No Inflation Protection	With 5% Inflation Protection
50	\$288	Not Available	\$250	\$688		Not Available	Not Available
55	\$388	Not Available	\$337	\$844		Not Available	Not Available
60	\$557	Not Available	\$485	\$1,090		Not Available	Not Available
65	\$859	Not Available	\$747	\$1,493		Not Available	Not Available
70	\$1,395	Not Available	\$1,213	\$2,123		Not Available	Not Available
75	\$2,359	Not Available	\$2,051	\$3,281		Not Available	Not Available
80	\$3,869	Not Available	\$3,364	\$5,047		Not Available	Not Available

Refer to Section 3 for information on premium increases, if any, since 1990 for this company.

This policy form is for Nursing Home and Residential Care Facility Only. This is an Individual type policy and is classified as Tax Qualified.

**Maximum Policy Benefit Amounts**

- ☐ 1 Yr.      ☐ 2 Yrs.      ☒ 3 Yrs.      ☒ 4 Yrs.  
☒ 5 Yrs.      ☒ 6 Yrs.      ☐ 7 Yrs.      ☒ Lifetime

☐ Important Company Notes:

10 year plan is also available.

**Elimination Periods**

- ☒ 0 days      ☐ 60 days      **TYPE**  
☐ 20 days      ☒ 90 days      ☒ Calendar Day  
☒ 30 days      ☐ 100 days      ☐ Service Day

**Inflation Protection**

- ☒ 5% Compound      ☐ Guaranteed Purchase Option  
☒ 5% Simple      ☐ Important Company Notes

*Compound - On each policy anniversary, daily/monthly benefit amounts, as well as remaining benefit amount payable is increased by 5% compounded annually. Simple - On each policy anniversary, the daily/monthly benefit amounts, as well as the remaining benefit amount payable is increased by 5% of the original dollar amount issued.*

**Residential Care Facility Daily Benefit Amounts**

Represents the percentage of the Nursing Home Daily Benefit Amount.

- ☐ 80%      ☐ 75%  
☒ 100%      ☐ 90%  
☐ 70%      ☐ Important Company Notes

**Nursing Home Daily Benefit Amounts**

\$50 minimum to \$300 maximum per [day, week or month] offered in increments of \$10.

- ☒ per day      ☐ per week      ☐ per month

☐ Not Available

☐ Important Company Notes:

**Waiver of Premium**

Premiums due for the policy and any attached riders are waived after satisfaction of a 90 calendar day waiting period for facility confinement. Any unearned premium is refunded on a pro-rata basis. Premiums are waived until facility confinement ends. (7 calendar days counted for one or more days of confinement during a 7-day period)

**Annual premium amount for Nursing Home and Residential Care Facility Only Policy with a \$100 daily benefit amount.**

Day Elimination Period. 3 year maximum policy benefit			Day Elimination Period. 3 year maximum policy benefit			Day Elimination Period. Lifetime benefit	
Issue Age	No Inflation Protection	With 5% Inflation Protection	No Inflation Protection	With 5% Inflation Protection		No Inflation Protection	With 5% Inflation Protection
50	\$304	\$837	\$265	\$728		\$420	\$1,155
55	\$370	\$924	\$321	\$803		\$510	\$1,275
60	\$522	\$1,174	\$454	\$1,021		\$720	\$1,620
65	\$717	\$1,435	\$624	\$1,247		\$990	\$1,980
70	\$1,174	\$2,054	\$1,021	\$1,786		\$1,620	\$2,835
75	\$1,956	\$3,130	\$1,701	\$2,722		\$2,700	\$4,320
80	\$3,391	\$5,086	\$2,948	\$4,423		\$4,680	\$7,020

Refer to Section 3 for information on premium increases, if any, since 1990 for this company.

This policy form is for Nursing Home and Residential Care Facility Only. This is an Individual type policy and is classified as Tax Qualified.

### Maximum Policy Benefit Amounts

- ☐ 1 Yr.      ☒ 2 Yrs.      ☒ 3 Yrs.      ☒ 4 Yrs.  
☒ 5 Yrs.      ☐ 6 Yrs.      ☒ 7 Yrs.      ☒ Lifetime

☐ Important Company Notes:

730, 1095, 1460, 1825, 2555 (No. of days) times the Nursing Facility Daily Benefit.

### Elimination Periods

- ☐ 0 days      ☐ 60 days      **TYPE**  
☒ 20 days      ☐ 90 days      ☒ Calendar Day  
☐ 30 days      ☒ 100 days      ☒ Service Day

### Inflation Protection

- ☒ 5% Compound      ☒ Guaranteed Purchase Option  
☒ 5% Simple      ☐ Important Company Notes

### Nursing Home Daily Benefit Amounts

\$90 minimum to \$400 maximum per [day, week or month] offered in increments of \$10.

- ☒ per day      ☐ per week      ☐ per month

☐ Not Available

☐ Important Company Notes:

### Residential Care Facility Daily Benefit Amounts

Represents the percentage of the Nursing Home Daily Benefit Amount.

- ☐ 80%      ☐ 75%  
☒ 100%      ☐ 90%  
☐ 70%      ☐ Important Company Notes

### Waiver of Premium

Takes effect upon benefit eligibility(after elimination period is satisfied)

Annual premium amount for Nursing Home and Residential Care Facility Only Policy with a \$100 daily benefit amount.

Day Elimination Period. 3 year maximum policy benefit			Day Elimination Period. 3 year maximum policy benefit			Day Elimination Period. Lifetime benefit		
Issue Age	No Inflation Protection	With 5% Inflation Protection	No Inflation Protection	With 5% Inflation Protection		No Inflation Protection	With 5% Inflation Protection	
50	\$445	\$1,140	\$387	\$991		\$733	\$2,061	
55	\$486	\$1,231	\$422	\$1,070		\$816	\$2,235	
60	\$690	\$1,538	\$600	\$1,338		\$1,152	\$2,860	
65	\$1,035	\$2,084	\$900	\$1,893		\$1,734	\$3,814	
70	\$1,726	\$3,155	\$1,501	\$2,744		\$2,876	\$5,514	
75	\$3,084	\$5,098	\$2,681	\$4,433		\$5,033	\$8,578	
80	\$5,246	\$8,092	\$4,562	\$7,036		\$8,346	\$13,175	

Refer to Section 3 for information on premium increases, if any, since 1990 for this company.

This policy form is for Nursing Home and Residential Care Facility Only. This is an Individual type policy and is classified as Tax Qualified.

### Maximum Policy Benefit Amounts

- ☐ 1 Yr.    ☒ 2 Yrs.    ☒ 3 Yrs.    ☒ 4 Yrs.  
☒ 5 Yrs.    ☐ 6 Yrs.    ☒ 7 Yrs.    ☒ Lifetime

☒ Important Company Notes:

730, 1095, 1460, 1825, 2555 or 3650 (No. of days) times the Nursing Facility Daily Benefit. 10 Yrs. Plan is also available

### Elimination Periods

- ☐ 0 days    ☐ 60 days    ☐ TYPE  
☒ 20 days    ☒ 90 days    ☐ Calendar Day  
☐ 30 days    ☐ 100 days    ☒ Service Day

### Inflation Protection

- ☒ 5% Compound    ☒ Guaranteed Purchase Option  
☒ 5% Simple    ☒ Important Company Notes

There are 7 automatic annual inflation protection options: Simple 1%, Simple 2%, Simple 3%, Simple 4%, Simple 5%, Simple 6% and Compound 5%. There are 3 Guaranteed Purchase Options: CPI-U, CPI-U + 1 and CPI-U + 2. With the CPI-U Guaranteed Purchase option, the policyowner receives annual offers to increase his benefits proportionally to the increase in the CPI-U over the past year (september last year to september 2 years prior). The increase in

### Residential Care Facility Daily Benefit Amounts

Represents the percentage of the Nursing Home Daily Benefit Amount.

- ☐ 80%    ☐ 75%  
☒ 100%    ☐ 90%  
☐ 70%    ☐ Important Company Notes

### Nursing Home Daily Benefit Amounts

\$50 minimum to \$400 maximum per [day, week or month] offered in increments of \$1.

- ☒ per day    ☐ per week    ☐ per month

☐ Not Available

☐ Important Company Notes:

### Waiver of Premium

Premiums will be waived beginning on the first day that benefits are payable after the Waiting Period has been satisfied. Premiums will continue to be waived until no benefits are payable for 30 consecutive days.

Annual premium amount for Nursing Home and Residential Care Facility Only Policy with a \$100 daily benefit amount.

Day Elimination Period. 3 year maximum policy benefit			Day Elimination Period. 3 year maximum policy benefit			Day Elimination Period. Lifetime benefit		
Issue Age	No Inflation Protection	With 5% Inflation Protection	No Inflation Protection	With 5% Inflation Protection		No Inflation Protection	With 5% Inflation Protection	
50	\$314	\$981	\$215	\$672		\$366	\$1,189	
55	\$476	\$1,310	\$326	\$897		\$552	\$1,581	
60	\$651	\$1,588	\$446	\$1,088		\$750	\$1,905	
65	\$965	\$2,050	\$661	\$1,404		\$1,104	\$2,441	
70	\$1,496	\$2,758	\$1,025	\$1,889		\$1,697	\$3,273	
75	\$2,468	\$4,006	\$1,690	\$2,744		\$2,794	\$4,742	
80	\$0	\$0	\$0	\$0		\$0	\$0	

Refer to Section 3 for information on premium increases, if any, since 1990 for this company.

This policy form is for Nursing Home and Residential Care Facility Only. This is an Individual type policy and is classified as Tax Qualified.

**Maximum Policy Benefit Amounts**

- ☒ 1 Yr.      ☒ 2 Yrs.      ☐ 3 Yrs.      ☐ 4 Yrs.  
☐ 5 Yrs.      ☐ 6 Yrs.      ☐ 7 Yrs.      ☐ Lifetime  
☐ Important Company Notes:

**Elimination Periods**

- ☐ 0 days      ☐ 60 days      **TYPE**  
☐ 20 days      ☐ 90 days      ☐ Calendar Day  
☐ 30 days      ☒ 100 days      ☒ Service Day

**Inflation Protection**

- ☒ 5% Compound      ☐ Guaranteed Purchase Option  
☐ 5% Simple      ☐ Important Company Notes

**Nursing Home Daily Benefit Amounts**

\$50 minimum to \$100 maximum per [day, week or month] offered in increments of \$10.

- ☒ per day      ☐ per week      ☐ per month  
☐ Not Available  
☐ Important Company Notes:

**Residential Care Facility Daily Benefit Amounts**

Represents the percentage of the Nursing Home Daily Benefit Amount.

- ☒ 100%      ☐ 90%      ☐ 80%      ☐ 75%  
☐ 70%      ☐ Important Company Notes

**Waiver of Premium**

None offered with this policy.

Annual premium amount for Nursing Home and Residential Care Facility Only Policy with a \$100 daily benefit amount.

Day Elimination Period. 3 year maximum policy benefit			Day Elimination Period. 3 year maximum policy benefit			Day Elimination Period. Lifetime benefit		
Issue Age	No Inflation Protection	With 5% Inflation Protection	No Inflation Protection	With 5% Inflation Protection		No Inflation Protection	With 5% Inflation Protection	
50	Not Available	Not Available	\$580	\$1,020		Not Available	Not Available	
55	Not Available	Not Available	\$770	\$1,360		Not Available	Not Available	
60	Not Available	Not Available	\$970	\$1,710		Not Available	Not Available	
65	Not Available	Not Available	\$1,540	\$2,640		Not Available	Not Available	
70	Not Available	Not Available	\$2,820	\$4,530		Not Available	Not Available	
75	Not Available	Not Available	\$5,010	\$7,320		Not Available	Not Available	
80	Not Available	Not Available	\$9,000	\$11,740		Not Available	Not Available	

Refer to Section 3 for information on premium increases, if any, since 1990 for this company.

This policy form is for Nursing Home and Residential Care Facility Only. This is an Individual type policy and is classified as Tax Qualified.

**Maximum Policy Benefit Amounts**

- ☒ 1 Yr.      ☒ 2 Yrs.      ☒ 3 Yrs.      ☒ 4 Yrs.  
☒ 5 Yrs.      ☐ 6 Yrs.      ☐ 7 Yrs.      ☒ Lifetime

☐ Important Company Notes:

*Our Facility Care Benefit is monthly so it is 12 times the Facility Care benefit times the Benefit Period selected. Also, we offer 8 Yrs..*

**Elimination Periods**

- ☒ 0 days      ☒ 60 days      **TYPE**  
☐ 20 days      ☒ 90 days      ☒ Calendar Day  
☒ 30 days      ☐ 100 days      ☒ Service Day

**Inflation Protection**

- ☒ 5% Compound      ☒ Guaranteed Purchase Option  
☒ 5% Simple      ☐ Important Company Notes  
*Also offer 5% compound capped at 2 x monthly benefit originally selected. The Facility Care Benefit & remaining Maximum Benefit are increased by 5% annually.*

**Nursing Home Daily Benefit Amounts**

\$900 minimum to \$9000 maximum per [day, week or month] offered in increments of \$100.

- ☐ per day      ☐ per week      ☒ per month

☐ Not Available

☐ Important Company Notes:

**Residential Care Facility Daily Benefit Amounts**

Represents the percentage of the Nursing Home Daily Benefit Amount.

- ☐ 80%      ☐ 75%  
☒ 100%      ☐ 90%  
☐ 70%      ☐ Important Company Notes

**Waiver of Premium**

We waive premium after 90 service days.

Annual premium amount for Nursing Home and Residential Care Facility Only Policy with a \$100 daily benefit amount.

Day Elimination Period. 3 year maximum policy benefit			Day Elimination Period. 3 year maximum policy benefit			Day Elimination Period. Lifetime benefit		
Issue Age	No Inflation Protection	With 5% Inflation Protection	No Inflation Protection	With 5% Inflation Protection		No Inflation Protection	With 5% Inflation Protection	
50	\$409	\$1,095	\$349	\$936		\$572	\$1,797	
55	\$516	\$1,281	\$441	\$1,095		\$724	\$2,091	
60	\$696	\$1,601	\$595	\$1,369		\$976	\$2,556	
65	\$1,007	\$2,055	\$861	\$1,756		\$1,411	\$3,302	
70	\$1,634	\$2,990	\$1,397	\$2,556		\$2,290	\$4,556	
75	\$2,878	\$4,777	\$2,460	\$4,083		\$4,032	\$7,056	
80	\$4,198	\$6,507	\$3,588	\$5,562		\$5,882	\$9,412	

Refer to Section 3 for information on premium increases, if any, since 1990 for this company.

This policy form is for Nursing Home and Residential Care Facility Only. This is an Individual type policy and is classified as Tax Qualified.

### Maximum Policy Benefit Amounts

- ☐ 1 Yr.    ☐ 2 Yrs.    ☒ 3 Yrs.    ☐ 4 Yrs.  
☒ 5 Yrs.    ☐ 6 Yrs.    ☐ 7 Yrs.    ☒ Lifetime  
☐ Important Company Notes:

### Elimination Periods

- ☒ 0 days    ☐ 60 days    **TYPE**  
☐ 20 days    ☒ 90 days    ☐ Calendar Day  
☒ 30 days    ☐ 100 days    ☒ Service Day

### Inflation Protection

- ☒ 5% Compound    ☐ Guaranteed Purchase Option  
☒ 5% Simple    ☒ Important Company Notes

*Optional 5% simple increase rider, increases original daily benefit by 5% annually, optional 5% compound increase rider increases daily maximum by 5% compounded annually*

### Nursing Home Daily Benefit Amounts

\$50 minimum to \$300 maximum per [day, week or month] offered in increments of \$10.

- ☒ per day    ☐ per week    ☐ per month  
☐ Not Available  
☐ Important Company Notes:

### Residential Care Facility Daily Benefit Amounts

Represents the percentage of the Nursing Home Daily Benefit Amount.

- ☐ 80%    ☐ 75%  
☒ 100%    ☐ 90%  
☐ 70%    ☐ Important Company Notes

### Waiver of Premium

Provided after confinement in a nursing facility or residential care facility for a period of 90 days, days need not be consecutive.

Annual premium amount for Nursing Home and Residential Care Facility Only Policy with a \$100 daily benefit amount.

Day Elimination Period. 3 year maximum policy benefit			Day Elimination Period. 3 year maximum policy benefit			Day Elimination Period. Lifetime benefit		
Issue Age	No Inflation Protection	With 5% Inflation Protection	No Inflation Protection	With 5% Inflation Protection		No Inflation Protection	With 5% Inflation Protection	
50	\$252	\$631	\$210	\$526		\$324	\$810	
55	\$336	\$758	\$280	\$631		\$432	\$972	
60	\$449	\$898	\$374	\$748		\$576	\$1,152	
65	\$730	\$1,314	\$608	\$1,095		\$936	\$1,684	
70	\$1,207	\$1,992	\$1,006	\$1,660		\$1,548	\$2,554	
75	\$1,825	\$2,737	\$1,521	\$2,281		\$2,340	\$3,510	
80	\$3,229	\$4,520	\$2,691	\$3,767		\$4,140	\$5,796	

Refer to Section 3 for information on premium increases, if any, since 1990 for this company.



This policy form is for Nursing Home and Residential Care Facility Only. This is an Individual type policy and is classified as Non-Tax Qualified.

**Maximum Policy Benefit Amounts**

☒ 1 Yr.      ☒ 2 Yrs.      ☒ 3 Yrs.      ☒ 4 Yrs.  
☒ 5 Yrs.      ☒ 6 Yrs.      ☐ 7 Yrs.      ☒ Lifetime

☒ Important Company Notes:

*2920 days is equivalent to 8 years*

**Elimination Periods**

☒ 0 days      ☒ 60 days      **TYPE**  
☐ 20 days      ☒ 90 days      ☐ Calendar Day  
☒ 30 days      ☐ 100 days      ☒ Service Day

**Inflation Protection**

☒ 5% Compound      ☐ Guaranteed Purchase Option  
☒ 5% Simple      ☒ Important Company Notes

*Also available are 3% and 4% compound inflation options. The Maximum Daily Benefit Amount and the Maximum Benefit Amount per claim episode are increased each policy anniversary by the selected inflation option without regard to claims paid. Premiums remain level.*

**Nursing Home Daily Benefit Amounts**

\$40 minimum to \$300 maximum per [day, week or month] offered in increments of \$10.

☒ per day      ☐ per week      ☐ per month

☐ Not Available

☐ Important Company Notes:

**Residential Care Facility Daily Benefit Amounts**

Represents the percentage of the Nursing Home Daily Benefit Amount.

☒ 100%      ☐ 90%      ☐ 80%      ☐ 75%  
☐ 70%      ☐ Important Company Notes

**Waiver of Premium**

Premiums waived after 90 days of receiving covered services, regardless if the elimination period has been satisfied. Premium is waived for the entire policy, including any attached riders and spouse's premium if covered under the same policy.

Annual premium amount for Nursing Home and Residential Care Facility Only Policy with a \$100 daily benefit amount.

30 Day Elimination Period. 3 year maximum policy benefit			90 Day Elimination Period. 3 year maximum policy benefit		90 Day Elimination Period. Lifetime benefit	
Issue Age	No Inflation Protection	With 5% Inflation Protection	No Inflation Protection	With 5% Inflation Protection	No Inflation Protection	With 5% Inflation Protection
50	\$289	\$792	\$264	\$722	\$393	\$1,170
55	\$382	\$1,019	\$348	\$928	\$524	\$1,485
60	\$561	\$1,358	\$511	\$1,237	\$770	\$1,969
65	\$885	\$1,882	\$806	\$1,715	\$1,213	\$2,717
70	\$1,498	\$2,752	\$1,365	\$2,507	\$2,065	\$3,972
75	\$2,568	\$4,128	\$2,340	\$3,761	\$3,490	\$5,840
80	\$4,210	\$6,284	\$3,836	\$5,726	\$0	\$0

Refer to Section 3 for information on premium increases, if any, since 1990 for this company.